POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*T.D.*		3-15-00
O.I.P.E. CLASSIFIER	*DW*	32	3/21
FORMALITY REVIEW		7186	5.9.00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim Final	Original	Date 3/7/03	11/13/03	4/29/04							
	1	✔	✔	✔							
	2	✔	✔	✔							
	3	✔	✔	✔							
	4	✔	✔	✔							
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	6	O	O	O							
	7	O	O	O							
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	9	O	O	O							
	10	✔	✔	✔							
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	13	O	O	O							
	14	O	O	O							
	15	✔	✔	✔							
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If more than 150 claims or 10 actions
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